Committee Name:		
Americans for Cannab	is Legalization	
If registered, FEC ID:		
Today's Date:		
10/14/2014		

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Connor P. Burns

Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVE Only

			Office Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M520 AK (): 01	-
			TEC MAIL CENTER	
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COMMITTEE'S E-MAIL ADDRE	ESS			
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•	Optional Second E-Mai	· •		
				لـنـ
COMMITTEE'S WEB PAGE AD	DDRESS (URL)			
(Check if address is changed)	1			, 1
is changed)	·			
			<u> </u>	
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2. DATE / 0	4 2014			
3. FEC IDENTIFICATION N	IUMBER ▶			
4. IS THIS STATEMENT		AMENDED (A)		
I certify that I have examined t	this Statement and to the	best of my knowledge and belief	it is true, correct and complete.	
•	C	P. Burns	×.	
Type or Print Name of Treasure	er <u>Connor</u>	1. Durns	,,,,,,,,,,,,,,,,,,,,	
Signature of Treasurer	Com f	An	Date 10 114 201	4
NOTE: Submission of false, error		ation may subject the person signin	g this Statement to the penalties of 2 U.S.C. §4 WITHIN 10 DAYS.	137g.
Office Use		For further information Federal Election Comm Toll Free 800-424-9530		

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4200

F	EC For	m 1 (Revised 02/2009)	Page 2		
TYPE	OF CO	DMMITTEE			
Cano	Candidate Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	elete the candidate		
Name Candid					
Candi Party	date Affiliatio	on Sought: House Senate President	State District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	Eccamona		
Name Candi					
Part	y Com	mittee:			
(d)			Democratic, Republican, etc.) Part		
Polit	ical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is		
		Corporation Corporation w/o Capital Stock	Labor Organization		
		Membership Organization Trade Association	Cooperative		
	,	In addition, this committee is a Lobbyist/Registrant PAC.			
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or part		
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint	Fund	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political		
	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number			
	2.	FEC ID number			
	3.	FEC ID number C			
	4.	FEC ID number C			

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Write or Type Committee Nam	ne	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lea	
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in pos-	session of committee
Full Name	MORIBERSPASIPAUL BURINS	
Mailing Address	7-16 CIEDIAIRI S.71	
	BURILI NETOIN VIT 0,514	0 11-[4,2,2,9
Title or Position	CITY STATE	ZIP CODE
TIRIE A S U RE R	Telephone number	
3. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	me and address of
Full Name of Treasurer	MOR BERESPAUL BURNS	
Mailing Address	FIG. CEDAR ST.	
Tille as D		
Title or Position TIRIFINISIUI RIFIR	Telephone number	

Page 4

Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

Mailing Address

CITY

STATE

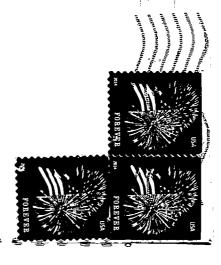
ZIP CODE

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RECEIVET.
MACOTOR AMID: CE
FEC MAIL CENTER

FEDERAL ELECTIONS COMMISSION
999 E STREET, NW
WASHINGTON, DC 20463

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(8/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked USPS First Class Mail 10/14/14 Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked USPS Priority Mail Express Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 10/20/14

DATE PREPARED